



## **INSTRUCTIONS FOR FILING APPLICATION FOR SIGN WAIVER**

1. YOU ARE REQUIRED TO DISCUSS YOUR APPLICATION AND PLANS FOR SIGN WAIVER APPROVAL WITH STAFF IN ORDER TO AVOID FILING AN INCOMPLETE APPLICATION. CALL THE CITY PLANNER AT (954) 746-3281 TO SCHEDULE AN APPOINTMENT AT LEAST FOURTEEN 14 DAYS PRIOR TO THE SUBMITTAL DEADLINE.
2. Application (12 copies) for Sign Waiver Approval form duly executed by owner.
3. Twelve (12) sets of plans drawn to scale, showing the design of the sign, including dimensions, sign size, method of attachment, source of illumination, colors, and showing the relationship to any building or structure to which it is proposed to be installed or affixed.
4. Twelve (12), one (1) original and eleven (11) copies, of plot plan, to scale, indicating the location of the sign relative to property lines, right-of-way, streets, easements, sidewalks, and other buildings or structures on the premises, and twelve (12) copies of current property survey.
5. Twelve (12), one (1) original and eleven (11) copies of a letter describing the request.
6. Twelve (12) sets of photographs, which indicate the proposed sign location.
7. A check for the filing fee, made payable to the City of Sunrise, in accordance with the CITY OF SUNRISE PLANNING & DEVELOPMENT DEPARTMENT FEE SCHEDULE (attached).
8. Applicants must file their application according to the attached schedule. The Planning and Zoning Advisory Board must approve applications. Denials may be appealed, in writing, to the City Commission within ten (10) days of the Planning and Zoning Advisory Board decision. Your presence at all meetings is required.
9. The above is to be submitted in the following order:
  - a. Letter of Intent (on top).
  - b. Fully executed application.
  - c. If a photograph is required it should be placed on top of the Letter of Intent.





**Planning and Development Department**

**Application for Sign Waiver**

1. Name of Business \_\_\_\_\_
- Name of Applicant \_\_\_\_\_
- Name of Company \_\_\_\_\_
- Address \_\_\_\_\_
- Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Contact Person/Agent \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

**(IF AGENT, SUBMIT LETTER OF AUTHORIZATION)**

2. Name of Property Owner \_\_\_\_\_
- Company Name \_\_\_\_\_
- Address \_\_\_\_\_
- Telephone No. \_\_\_\_\_

3. Legal Description of Property Covered by this Application:

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4. Folio Number (with recent copy of tax bill)\_\_\_\_\_

Zoning: \_\_\_\_\_Acres: \_\_\_\_\_

5. Is this hearing being requested as a result of a violation notice or summons?

Yes\_\_ No\_\_ If yes, in whose name was the violation or summons notice served?

Nature of violation\_\_\_\_\_

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**AFFIDAVIT OF OWNER OR TENANT**

I, \_\_\_\_\_ (all owners on deed / all tenants on lease), being first duly sworn, depose and say that I am the \_\_\_\_\_ owner \_\_\_\_\_ tenant (check one) of the Property described in the above application for public hearing; that all the answers to the questions in this application, sketches, data, and other supplementary matter attached to and made a part of this application, are honest and true to the best of my knowledge and belief. I understand this application must be accurately completed before a hearing can be advertised. In the event that I, or anyone appearing on my behalf, am found to have made a material misrepresentation regarding this application, I understand the application can be cancelled, and any sign waiver granted can be made null and void by the City, at its sole option.

\_\_\_\_\_  
Print Name \_\_\_\_\_

State of \_\_\_\_\_,  
County of \_\_\_\_\_:

Sworn and subscribed to before me, a Notary Public, by \_\_\_\_\_,  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, who is either personally known to me  
or who has produced \_\_\_\_\_ as identification.

My Commission Expires:

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Print Name: \_\_\_\_\_

## CORPORATION AFFIDAVIT

I, \_\_\_\_\_, being first duly sworn, depose and say that I am the President of \_\_\_\_\_, a corporation existing under the laws of the State of \_\_\_\_\_, and who is authorized by the corporation to file this application for public hearing; that all answers to the questions in said application, sketches, data, and other supplementary matter attached to and made a part of the application, are honest and true to the best of my knowledge and belief; that said corporation is the \_\_\_\_\_ owner \_\_\_\_\_ tenant of the property described herein and which is the subject matter of the proposed hearing. I understand this application must be accurately completed before a hearing can be advertised. In the event that I, or anyone appearing on behalf of the corporate applicant, am found to have made a material misrepresentation, either oral or written, regarding this application, it is understood that the application can be cancelled, and any sign waiver granted may be made null and void by the City of Sunrise, at its sole option.

\_\_\_\_\_  
President's Signature (Corp. Seal)

ATTEST:

\_\_\_\_\_  
Secretary's Signature

State of \_\_\_\_\_,  
County of \_\_\_\_\_:

Sworn and subscribed to before me, a Notary Public, by \_\_\_\_\_,  
this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, who is either personally known to me or who  
has produced \_\_\_\_\_ as identification.

My Commission Expires:

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Print Name: \_\_\_\_\_

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**ATTORNEY AFFIDAVIT**

I, \_\_\_\_\_, being first duly sworn, depose and say that I am an Attorney at Law, who is licensed to practice in the State of Florida, who represents the Owner of the property described above, and which is the subject matter of a proposed public hearing; that all data and other supplementary matter attached to and made a part of this application are honest and true to the best of my knowledge and belief. I understand this application must be accurately completed before a hearing can be advertised. I have advised my client that if any material misrepresentation is made regarding this application, either oral or written, can cause this application to be cancelled, and any sign waiver granted may become voided by the City of Sunrise, at its sole option.

\_\_\_\_\_  
Signature

State of \_\_\_\_\_,  
County of \_\_\_\_\_:

Sworn and subscribed to before me, a Notary Public, by \_\_\_\_\_,  
this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, who is either personally known to me or who  
has produced \_\_\_\_\_ as identification.

My Commission Expires:

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Print Name: \_\_\_\_\_

**OWNER'S SWORN CONSENT**

**PERMITTING TENANT TO FILE FOR A HEARING**

I, \_\_\_\_\_, being first duly sworn, depose and say that I am the owner of the Property described in the above application, which is the subject matter of the proposed hearing, and do hereby authorize \_\_\_\_\_, my tenant, to file this application for a public hearing.

\_\_\_\_\_  
Signature

State of \_\_\_\_\_,  
County of \_\_\_\_\_:

Sworn and subscribed to before me, a Notary Public, by \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, who is either personally known to me or who has produced \_\_\_\_\_ as identification.

My Commission Expires:

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Print Name: \_\_\_\_\_

Note: Each owner of the Property must execute this form.

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